|   | States Bankr<br>hern District of  |  |                               |   |   | Volu                                    | ıntary Petition                     |
|---|---|--|-------------------------------|---|---|---|-------------------------------------|
| Name of Debtor (if individual, enter Last, First, Crawford, Latasha Latrice   | Name of Debtor (if individual, enter Last, First, Middle):  Crawford, Latasha Latrice           |  |                               |   | ebtor (Spouse   | (Last, First, Middle):                  |                                     |
| All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):  | 3 years   |  |                               |   |   | oint Debtor in the last 8 trade names): | years                               |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-9144  | yer I.D. (ITIN) No./Co  | omplete EIN                                      | Last fo                       | our digits of than one, state   | f Soc. Sec. or  | Individual-Taxpayer I.D                 | O. (ITIN) No./Complete EIN          |
| Street Address of Debtor (No. and Street, City, at 5230 Northcrest Drive Northport, AL  | nd State):  | ZID Code   | Street                        | Address of  | Joint Debtor  | (No. and Street, City, an               | d State):  ZIP Code                 |
|   | 3   | ZIP Code <b>5473</b>                             | 1                             |   |   |   | ZIP Code                            |
| County of Residence or of the Principal Place of<br>Tuscaloosa  |   |  |                               | •   |   | Principal Place of Busin                |                                     |
| Mailing Address of Debtor (if different from stre   | et address):  |  | Mailin                        | g Address   | of Joint Debt   | or (if different from stree             | et address):                        |
|   |   | ZIP Code   | _                             |   |   |   | ZIP Code                            |
| Location of Principal Assets of Business Debtor (if different from street address above):   | I   |  | <u> </u>                      |   |   |   | I                                   |
| Type of Debtor  (Form of Organization) (Check one box)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)  Railroad Stockbroker Commodity Broker  |   | one box)<br>iness<br>il Estate as de<br>01 (51B) | efined                        | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt                                   | the I<br>er 7<br>er 9<br>er 11<br>er 12                                   | of a Foreign M ☐ Chapter 15 Pe          |                                     |
| ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  | Clearing Bank Other Tax-Exen (Check box, Debtor is a tax-e under Title 26 of Code (the Internal | if applicable)<br>xempt organi<br>the United S   | tates                         | defined<br>"incurr  | •   |   | Debts are primarily business debts. |
| Filing Fee (Check one box)  | )   | Check one  | box:                          | l   | Chap  | ter 11 Debtors                          |                                     |
| ■ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  □ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. |   |  |                               | regate nonco<br>\$2,343,300 (are boxes:<br>ag filed with<br>of the plan w | ness debtor as on<br>ntingent liquida<br>amount subject<br>this petition. |   | and every three years thereafter).  |
| Statistical/Administrative Information  Debtor estimates that funds will be available for distribution to unsecured creditors.  Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.  |   |  |                               |   | OR COURT USE ONLY   |   |                                     |
| 1- 50- 100- 200- 1  | 1,000- 5,001-   |  | 5,001-<br>0,000               | 50,001-<br>100,000  | OVER 100,000  |   |                                     |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$<br>\$50,000 \$100,000 \$500,000 to \$1   | \$1,000,001 \$10,000,001<br>to \$50   | to \$100 to                                      | 00,000,001<br>\$500<br>illion | \$500,000,001<br>to \$1 billion   | More than<br>\$1 billion  |   |                                     |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$<br>\$50,000 \$100,000 \$500,000 to \$1   | \$1,000,001 \$10,000,001<br>to \$10 to \$50   | to \$100 to                                      |                               | \$500,000,001<br>to \$1 billion   | More than \$1 billion   |   |                                     |

B1 (Official Form 1)(4/10) Page 2 Name of Debtor(s): Voluntary Petition Crawford, Latasha Latrice (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Anne Wilson Guthrie June 9, 2010 Signature of Attorney for Debtor(s) (Date) **Anne Wilson Guthrie** Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(4/10)

Signatures

## **Voluntary Petition**

(This page must be completed and filed in every case)

#### Crawford, La

Name of Debtor(s):

Crawford, Latasha Latrice

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

Iff petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7, I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Latasha Latrice Crawford

Signature of Debtor Latasha Latrice Crawford

 $\mathbf{X}$ 

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

June 9, 2010

Date

#### Signature of Attorney\*

#### X /s/ Anne Wilson Guthrie

Signature of Attorney for Debtor(s)

#### **Anne Wilson Guthrie**

Printed Name of Attorney for Debtor(s)

#### **WILSON & GUTHRIE, LLC**

Firm Name

1308 Greensboro Avenue Tuscaloosa, AL 35401

Address

## Email: anneguthrie@bellsouth.net

205-349-2330 Fax: 205-349-2380

Telephone Number

June 9, 2010

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| ٦ | c | 7 | - |  |
|---|---|---|---|--|

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

| In re | Latasha Latrice Crawford |           | Case No. |    |
|-------|--------------------------|-----------|----------|----|
|       |                          | Debtor(s) | Chapter  | 13 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| ☐ 4. I am not required to receive a credit constatement.] [Must be accompanied by a motion for d | unseling briefing because of: [Check the applicable   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| ☐ Incapacity. (Defined in 11 U.S.C.  | § 109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to  |  |  |  |  |  |
| • `  | § 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or   |  |  |  |  |  |
| ☐ Active military duty in a military of  | combat zone.  |  |  |  |  |  |
|  | 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |  |  |  |  |  |
| I certify under penalty of perjury that the information provided above is true and correct.      |   |  |  |  |  |  |
| Signature of Debtor:   | /s/ Latasha Latrice Crawford  Latasha Latrice Crawford  |  |  |  |  |  |
| Date: June 9, 2010   |   |  |  |  |  |  |

| In re | Latasha Latrice Crawford |        | Case No |    |
|-------|--------------------------|--------|---------|----|
|       |                          | Debtor |         |    |
|       |                          |        | Chapter | 13 |

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property  | Yes                  | 1                | 0.00              |             |          |
| B - Personal Property  | Yes                  | 3                | 1,500.00          |             |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 0.00        |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 6                |                   | 59,128.93   |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors  | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                |                   |             | 1,823.00 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                |                   |             | 1,745.00 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 17               |                   |             |          |
|  | T                    | otal Assets      | 1,500.00          |             |          |
|  |                      |                  | Total Liabilities | 59,128.93   |          |

|       | Nor  | rtnern District of Alabama                                       |                              |                                  |
|-------|--|--|------------------------------|----------------------------------|
| In re | Latasha Latrice Crawford   |  | Case No                      |                                  |
|       |  | Debtor   |                              |                                  |
|       |  |  | Chapter                      | 13                               |
|       | STATISTICAL SUMMARY OF Classification of the state of the | arily consumer debts, as defined in information requested below. | § 101(8) of the Bankruptcy ( | Code (11 U.S.C.§ 101(8)), filing |

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

### State the following:

| Average Income (from Schedule I, Line 16)  | 1,823.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 1,745.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 957.00   |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 0.00      |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 59,128.93 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 59,128.93 |

| In re | Latasha Latrice Crawford | Case No.    |  |
|-------|--------------------------|-------------|--|
| _     |                          | ,<br>Debtor |  |

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Property

Nature of Debtor's Interest in Property Property

Obelout's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

| In re | Latasha Latrice Crawford |        | Case No. |  |
|-------|--------------------------|--------|----------|--|
| -     |                          | Debtor |          |  |

## **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | , , ,   |                  | , · · · · · · · · · · · · · · · · · · ·                                 |   | ` '   |
|-----|---|------------------|---|---|---|
|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property                                    | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 1.  | Cash on hand  | X                |   |   |   |
| 2.  | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. |                  | Checking account at Wood Forest Bank                                    | -   | 500.00  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | Х                |   |   |   |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  |                  | BR suite, LR suite & table and chairs (other furnishings are roommates) | -   | 700.00  |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | Х                |   |   |   |
| 6.  | Wearing apparel.  |                  | Clothes   | -   | 300.00  |
| 7.  | Furs and jewelry.   | X                |   |   |   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | Х                |   |   |   |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | Х                |   |   |   |
| 10. | Annuities. Itemize and name each issuer.  | X                |   |   |   |
|     |   |                  |   |   |   |

2 continuation sheets attached to the Schedule of Personal Property

1,500.00

Sub-Total >

(Total of this page)

| In re | Latasha | Latrice | Crawford |
|-------|---------|---------|----------|

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | х                |                                      |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |                                      |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |   |
| 16. | Accounts receivable.  | X                |                                      |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                      |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                      |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |   |
|     |   |                  |                                      | Sub-Tota                                    | al > <b>0.00</b>  |
|     |   |                  | (To                                  | tal of this page)                           |   |

Sheet \_\_1\_\_ of \_\_2\_\_ continuation sheets attached to the Schedule of Personal Property

| _     |         |         | _        |
|-------|---------|---------|----------|
| In re | Latasha | Latrice | Crawford |

Debtor

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                      |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | X                |                                      |   |   |
| 26. | Boats, motors, and accessories.   | X                |                                      |   |   |
| 27. | Aircraft and accessories.   | X                |                                      |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |                                      |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                      |   |   |
| 30. | Inventory.  | X                |                                      |   |   |
| 31. | Animals.  | X                |                                      |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |                                      |   |   |
| 33. | Farming equipment and implements.   | X                |                                      |   |   |
| 34. | Farm supplies, chemicals, and feed.   | X                |                                      |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |                                      |   |   |

Sub-Total > 0.00 (Total of this page)

Total >

1,500.00

Sheet <u>2</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

| In re | Latasha Latrice Crawford |        | Case No. |  |
|-------|--------------------------|--------|----------|--|
| •     |                          | Debtor |          |  |

| SCHEDULE C - 1   | PROPERTY CLAIMED AS E                              | EXEMPT                           |   |
|--|--|----------------------------------|---|
| Debtor claims the exemptions to which debtor is entitled und (Check one box)  11 U.S.C. §522(b)(2)  11 U.S.C. §522(b)(3) | \$146,450. (Amount st                              | ubject to adjustment on 4/1/     | mption that exceeds /13, and every three years thereaft or after the date of adjustment.) |
| Description of Property  | Specify Law Providing Each Exemption               | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption                               |
| Checking, Savings, or Other Financial Accounts, Cer<br>Checking account at Wood Forest Bank                              | rtificates of <u>Deposit</u><br>Ala. Code § 6-10-6 | 500.00                           | 500.00  |
| Household Goods and Furnishings BR suite, LR suite & table and chairs (other furnishings are roommates)                  | Ala. Code § 6-10-6                                 | 700.00                           | 700.00  |
| Wearing Apparel<br>Clothes   | Ala. Code §§ 6-10-6, 6-10-126                      | 300.00                           | 300.00  |

Total: 1,500.00 1,500.00

| In re | Latasha Latrice Crawford | Case No. |
|-------|--------------------------|----------|
|       |                          |          |

Debtor

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| Check this box if debtor has no creditors holds  | .ng                  | 3000                               | red claims to report on this schedule D.   |              |              |        |   |                                 |
|--|----------------------|------------------------------------|--|--------------|--------------|--------|---|---------------------------------|
| CREDITOR'S NAME  |                      | Husband, Wife, Joint, or Community |  |              |              | D      | AMOUNT OF   |                                 |
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR             | C<br>A<br>M                        | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND VALUE<br>OF PROPERTY<br>SUBJECT TO LIEN | COXF - XGEXF | DZ1-QD-D4FED | SPUHED | CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
| Account No.  |                      |                                    |  | Т            | T<br>E       |        |   |                                 |
|  |                      |                                    | Value \$   |              | D            |        |   |                                 |
| A cooper No  | H                    | ┢                                  | Value φ  | H            |              | H      |   |                                 |
| Account No.  |                      |                                    | Value \$   |              |              |        |   |                                 |
| Account No.  |                      |                                    |  |              |              |        |   |                                 |
|  |                      |                                    | Value \$   |              |              |        |   |                                 |
| Account No.  |                      |                                    |  |              |              |        |   |                                 |
|  |                      |                                    | Value \$   |              |              |        |   |                                 |
| 0  |                      | _                                  | S  | ubto         | ota          | l      |   |                                 |
| continuation sheets attached   | (Total of this page) |                                    |  |              |              |        |   |                                 |
|  |                      |                                    | (Report on Summary of Sci  |              | ota<br>ule   |        | 0.00  | 0.00                            |

| n re | Latasha | Latrice | Crawford |
|------|---------|---------|----------|

| euse 110: |
|-----------|
|           |

Debtor

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

| priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.  |
|--|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |
| ☐ Domestic support obligations   |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).  |
| ☐ Extensions of credit in an involuntary case  |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. $\S$ 507(a)(3).   |
| ☐ Wages, salaries, and commissions   |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans  |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. $\S$ 507(a)(5).  |
| ☐ Certain farmers and fishermen  |
| Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ Deposits by individuals  |
| Claims of individuals up to $\$2,600*$ for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. $\$$ 507(a)(7).  |
| ☐ Taxes and certain other debts owed to governmental units   |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |
| ☐ Commitments to maintain the capital of an insured depository institution   |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   |
| ☐ Claims for death or personal injury while debtor was intoxicated   |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).   |
|  |

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| In re | Latasha Latrice Crawford |        | Case No. |  |
|-------|--------------------------|--------|----------|--|
| _     |                          | Debtor |          |  |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,   | С               | Hu               | Isband, Wife, Joint, or Community                         | CO        | U           | D        |                 |
|--|-----------------|------------------|---|-----------|-------------|----------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)         | C O D E B T O R | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND                               | NT L ZG E | Q D _ D     | I SPUTED | AMOUNT OF CLAIM |
| Account No. 2025369753   |                 |                  | Opened 3/01/08  | N         | A<br>T<br>E |          |                 |
| Afni, Inc./AT&T<br>Po Box 3427<br>Bloomington, IL 61702                                  |                 | -                | Account At T Formerly Bell South                          |           | E<br>D      |          | 176.00          |
| Account No. <b>09478-33052</b>   |                 |                  | 2009  | T         |             |          |                 |
| ALABAMA POWER CO<br>915 QUEEN CITY AVE<br>Tuscaloosa, AL 35401                           |                 | -                | Account   |           |             |          | 5,006.65        |
| Account No. 78575422   |                 |                  | Opened 7/10/08<br>Collection American Medical Response    |           |             |          |                 |
| Bay Area Credit Service/ AMR<br>1901 W 10th St<br>Antioch, CA 94509                      |                 | -                |   |           |             |          |                 |
|  |                 |                  |   |           |             |          | 656.00          |
| Account No. 1062770232  Care Connect/ CBSi 550 Greensboro Ave Ste 3 Tuscaloosa, AL 35401 |                 | _                | Opened 10/04/06<br>Collection Care Connect Of Alabama Inc |           |             |          |                 |
|  |                 |                  |   |           |             |          | 201.00          |
|  |                 |                  | (Total of t   | Subt      |             |          | 6,039.65        |

| In re | Latasha Latrice Crawford | Case No |  |
|-------|--------------------------|---------|--|
| _     |                          | ,       |  |

| CREDITOR'S NAME,  | C        | Hu          | sband, Wife, Joint, or Community  | Ç          | U<br>N | D<br>I |                 |
|---|----------|-------------|---|------------|--------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)    | CODEBTOR | C<br>A<br>H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | 1<br>L | SPUTE  | AMOUNT OF CLAIM |
| Account No. DOLLAR GE-53776988  |          |             | Opened 7/01/09 Last Active 7/01/09  | ] Ŧ        | T      |        |                 |
| Certegy<br>P.O. Box 30046<br>Tampa, FL 33630  |          | -           | ReturnedCheck   |            | D      |        | 23.00           |
| Account No. 1824335   |          |             | 7/12/07   |            |        |        |                 |
| Cnac/Al106<br>3109 Greensboro Ave<br>Tuscaloosa, AL 35401                           |          | -           | Automobile Deficiency   |            |        |        | 5.005.00        |
|   |          |             |   |            |        |        | 5,895.00        |
| Account No. 1050970008  Comcast C/O CBSi 550 Greensboro Avenue Tuscaloosa, AL 35401 |          | -           | Opened 4/01/05 Last Active 1/01/05 Account  |            |        |        | 765.00          |
| Account No. 1015998812  |          |             | Opened 1/07/10  |            |        |        |                 |
| DCH<br>c/o Franklin Collection Service<br>P.O. Box 3910<br>Tupelo, MS 38803-3910    |          | -           | MEDICAL SERVICES  |            |        |        | 3,699.00        |
| Account No. <b>D2166354N1</b>   |          |             | Opened 7/16/07  | Τ          |        |        |                 |
| DCH<br>c/o Senex<br>3500 Depauw Blvd Suite 305<br>Indianapolis, IN 46268            |          | -           | MEDICAL SERVICES  |            |        |        | 2,814.00        |
| Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of                       |          |             |   | Subt       |        |        | 13,196.00       |
| Creditors Holding Unsecured Nonpriority Claims                                      |          |             | (Total of t   | IIIS       | pag    | ge)    |                 |

| In re | Latasha Latrice Crawford | Case No |  |
|-------|--------------------------|---------|--|
| -     |                          | Debtor  |  |

| CDEDITOD'S NAME   | C        | Hu          | sband, Wife, Joint, or Community  | CO        | U           | D       |                 |
|---|----------|-------------|---|-----------|-------------|---------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | OZHIZGEZH | UNLIQUIDAT  | ISPUTED | AMOUNT OF CLAIM |
| Account No. 9917364   |          |             | March 2010  | ]⊤        | T<br>E<br>D |         |                 |
| Dunns Auto<br>6529 University Blve E<br>Cottondale, AL 35453                                      |          | -           | Automobile Deficiency   |           | D           |         | 8,378.00        |
| Account No. 9907404   |          |             | Opened 6/01/05 Last Active 7/01/05  |           |             |         |                 |
| Dunns Auto<br>6529 University Blve E<br>Cottondale, AL 35453                                      |          | -           | Automobile  |           |             |         | 3,044.00        |
| Account No. <b>8492064</b>  | ┪        |             | Opened 10/22/07 Last Active 1/01/10   | $\dagger$ |             |         |                 |
| First Revenue Assurance<br>4500 Cherry Creek Dr Ste<br>Denver, CO 80246                           |          | -           | Collection First Revenue Assurance/Att  |           |             |         | 722.00          |
| Account No. 1010914397  |          | T           | Opened 4/24/07  | T         |             |         |                 |
| Franklin Collection Sv (Original Cr<br>2978 W Jackson St<br>Tupelo, MS 38801                      |          | -           | Collection Lifecare Of Alabama Inc  |           |             |         | 467.00          |
| Account No. 6045872100082946  | T        |             | Opened 10/28/08 Last Active 10/01/06  | T         |             |         |                 |
| Lvnv Funding Llc (Original Creditor<br>Po Box 740281<br>Houston, TX 77274                         |          | -           | FactoringCompanyAccount Ge Capital Dillard S  |           |             |         | 413.00          |
| Sheet no. 2 of 5 sheets attached to Schedule of   |          |             |   | Subt      |             |         | 13,024.00       |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of t   | his       | pag         | ge)     |                 |

| In re | Latasha Latrice Crawford |        | Case No |  |
|-------|--------------------------|--------|---------|--|
| _     |                          | Debtor | -,      |  |

|  | _        |             |   |            | _                |          |                 |
|--|----------|-------------|---|------------|------------------|----------|-----------------|
| CREDITOR'S NAME,   | C        | Hu          | usband, Wife, Joint, or Community                         | ļç         | U                | P        |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | J<br>H<br>H | IS SUBJECT TO SETOFF, SO STATE.                           | CONTINGENT | I<br>D           | DISPUTED | AMOUNT OF CLAIM |
| Account No. <b>861025</b>  |          |             | Opened 1/01/04  | ] ⊤        | A<br>T<br>E<br>D |          |                 |
| National Credit Syst<br>3750 Naturally Fresh Blvd<br>Atlanta, GA 30349           |          | -           | Collection Insignia Landma                                |            | Ď                |          | 326.00          |
| Account No. 1072142725   |          |             | 2007  |            |                  |          |                 |
| NORTHSTAR PARAMEDICS<br>C/O CBSI<br>PO BOX 3227<br>Tuscaloosa, AL 35403          |          | -           | Medical Services  |            |                  |          | 1,531.00        |
| Account No. <b>3R3518951</b>   | -        | ┢           | Opened 1/27/10  | ╁          | ⊬                |          |                 |
| Rjm Acq Llc<br>575 Underhill Blvd Ste 2<br>Syosset, NY 11791                     |          | -           | FactoringCompanyAccount Compass Bank Checking Account-    |            |                  |          | 1,055.00        |
| Account No. 4R7302496  |          |             | Opened 7/25/05 Last Active 4/01/10                        | T          | Г                |          |                 |
| Rjm Acq Llc<br>575 Underhill Blvd Ste 2<br>Syosset, NY 11791                     |          | -           | FactoringCompanyAccount Amsouth Bank<br>Checking Account- |            |                  |          | 318.00          |
| Account No. 656R975458   |          |             | Opened 2/11/08  | T          | Г                |          |                 |
| Rjm Acq Llc<br>575 Underhill Blvd Ste 2<br>Syosset, NY 11791                     |          | -           | FactoringCompanyAccount Children S Book<br>Of The Month C |            |                  |          | 131.00          |
| Sheet no. 3 of 5 sheets attached to Schedule of                                  |          |             | S   | Subt       | tota             | 1        | 0.004.55        |
| Creditors Holding Unsecured Nonpriority Claims                                   |          |             | (Total of the   | his        | pag              | ge)      | 3,361.00        |

| In re | Latasha Latrice Crawford | Case No |  |
|-------|--------------------------|---------|--|
| -     |                          | Debtor  |  |

| CREDITOR'S NAME,   | Ç        | Нι          | usband, Wife, Joint, or Community                      | CO              | U<br>N                | D<br>I |                 |
|--|----------|-------------|--|-----------------|-----------------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                           | CODEBTOR | C<br>A<br>M | CONSIDERATION FOR CLAIM. IF CLAIM                      | 0 Z H _ Z G W Z | N L I Q U I D A T E D | SPUTE  | AMOUNT OF CLAIM |
| Account No. 886R564155   |          |             | Opened 9/30/08   | Τ̈́             | Ϊ́Ε                   |        |                 |
| Rjm Acq Llc<br>575 Underhill Blvd Ste 2<br>Syosset, NY 11791   |          | _           | FactoringCompanyAccount Black Expressions<br>Book Club |                 | ם                     |        | 95.00           |
| Account No. 2385960  | T        | T           | 2008   | Т               | Г                     |        |                 |
| Stuart Allan & Associates, Inc<br>5447 East 5th St, Suite 110<br>Tucson, AZ 85711-2345                     |          | -           | ACCOUNT  |                 |                       |        | 2,356.28        |
|  | ┡        | ╀           |  | ⊢               | ⊢                     | -      | ,               |
| Account No. 1092182145  The Radiology Clinic Credit Bureau Systems P.O. Box 3227 Tuscaloosa, AL 35403-3227 |          | -           | 2009 MEDICAL SERVICES                                  |                 |                       |        | 378.00          |
| Account No. 2xxxx  |          |             | 2009   |                 |                       |        |                 |
| Tucker Finance<br>3010A Skyland Blvd East<br>Tuscaloosa, AL 35405  |          | _           | Deficiency   |                 |                       |        | 9,527.00        |
| Account No. 1014991581   |          | T           | 2009   | П               | Т                     | Г      |                 |
| UNIVERSITY ORTHOPAEDIC CLINIC<br>C/O FRANKLIN COLLECTIONS<br>PO BOX 3910<br>Tupelo, MS 38803-3910          |          | _           | Medical Services                                       |                 |                       |        | 5,448.00        |
| Sheet no. 4 of 5 sheets attached to Schedule of  |          |             | S  | Subt            | ota                   | 1      | 47.004.00       |
| Creditors Holding Unsecured Nonpriority Claims   |          |             | (Total of t  | his j           | pag                   | ge)    | 17,804.28       |

| In re | Latasha Latrice Crawford | Case No |
|-------|--------------------------|---------|
| _     |                          | Debtor  |

|   | T 6             | 1           |   | 1.0         |            | 1.       | 1               |
|---|-----------------|-------------|---|-------------|------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C<br>H<br>M | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. |             |            | DISPUTED | AMOUNT OF CLAIM |
| Account No. 1013287360  |                 |             | Opened 9/26/08  | Т           | E          |          |                 |
| WEST AL EMERGENCY PHYSICAINS<br>C/O FRANKLIN COLLECTIONS<br>PO BOX 3910<br>Tupelo, MS 38803       |                 | -           | Medical Services  |             | D          |          | 5,704.00        |
| Account No.   | t               | H           |   | $\dagger$   | t          |          |                 |
|   |                 |             |   |             |            |          |                 |
| Account No.   | ┢               | ┢           |   | +           | +          | +        |                 |
|   |                 |             |   |             |            |          |                 |
| Account No.   | -               |             |   | +           | +          | +        |                 |
|   |                 |             |   |             |            |          |                 |
| Account No.   |                 |             |   |             |            |          |                 |
|   |                 |             |   |             |            |          |                 |
| Sheet no5 of _5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims     |                 | 1           | (Total of   | Sub<br>this |            |          | 5,704.00        |
|   |                 |             | (Report on Summary of S   |             | Tot<br>dul |          | 59,128.93       |

| In re | Latasha Latrice Crawford | Case No. |  |
|-------|--------------------------|----------|--|
| _     |                          | Debtor , |  |

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. B6H (Official Form 6H) (12/07)

| In re | Latasha Latrice Crawford |        | Case No. |  |
|-------|--------------------------|--------|----------|--|
| -     |                          | Debtor |          |  |

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

| In re | Latasha Latrice Crawford | Case No. |  |
|-------|--------------------------|----------|--|
|       |                          |          |  |

Debtor(s)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status:                                      | DEPENDENTS  | S OF DEBTOR AND SP | OUSE     |             |        |  |  |
|---|---|--------------------|----------|-------------|--------|--|--|
|   | RELATIONSHIP(S):                                  | AGE(S):            | AGE(S):  |             |        |  |  |
| Single  | Son   | 3                  |          |             |        |  |  |
| -   | Son   | 5                  |          |             |        |  |  |
| Employment:   | Daughter  DEBTOR                                  | <u> </u>           | SPOUSE   |             |        |  |  |
| Occupation Occupation   | DEBTOR  |                    | DI OCBE  |             |        |  |  |
| Name of Employer  |   |                    |          |             |        |  |  |
| How long employed   |   |                    |          |             |        |  |  |
| Address of Employer   |   |                    |          |             |        |  |  |
| reduces of Employer   |   |                    |          |             |        |  |  |
| INCOME: (Estimate of average or pro                           | ojected monthly income at time case filed)        |                    | DEBTOR   |             | SPOUSE |  |  |
|   | ommissions (Prorate if not paid monthly)          | \$                 | 0.00     | \$          | N/A    |  |  |
| 2. Estimate monthly overtime                                  | •   | \$                 | 0.00     | \$          | N/A    |  |  |
|   |   |                    | _        |             |        |  |  |
| 3. SUBTOTAL   |   | \$                 | 0.00     | \$          | N/A    |  |  |
|   |   |                    |          |             |        |  |  |
| 4. LESS PAYROLL DEDUCTIONS                                    |   |                    |          |             |        |  |  |
| a. Payroll taxes and social securi-                           | ty  | \$                 | 0.00     | \$          | N/A    |  |  |
| b. Insurance  |   | \$                 | 0.00     | \$          | N/A    |  |  |
| c. Union dues   |   | \$                 | 0.00     | \$          | N/A    |  |  |
| d. Other (Specify):   |   | \$                 | 0.00     | \$          | N/A    |  |  |
|   |   | \$                 | 0.00     | \$          | N/A    |  |  |
|   |   |                    |          |             |        |  |  |
| 5. SUBTOTAL OF PAYROLL DEDU                                   | ICTIONS   | \$                 | 0.00     | \$          | N/A    |  |  |
| 6. TOTAL NET MONTHLY TAKE H                                   | IOME PAY  | \$                 | 0.00     | \$          | N/A    |  |  |
| 7. Regular income from operation of b                         | usiness or profession or farm (Attach detailed st | atement) \$        | 0.00     | \$          | N/A    |  |  |
| 8. Income from real property                                  |   | \$                 | 0.00     | \$          | N/A    |  |  |
| 9. Interest and dividends                                     |   | \$                 | 0.00     | \$          | N/A    |  |  |
| 10. Alimony, maintenance or support p dependents listed above | payments payable to the debtor for the debtor's u | se or that of      | 957.00   | \$          | N/A    |  |  |
| 11. Social security or government assis                       | stance  | · <del>-</del>     |          |             |        |  |  |
| (Specify): Food Stamps  |   | \$                 | 94.00    | \$          | N/A    |  |  |
| Social Security   |   |                    | 772.00   | \$          | N/A    |  |  |
| 12. Pension or retirement income                              |   | <u> </u>           | 0.00     | \$          | N/A    |  |  |
| 13. Other monthly income                                      |   | · <del>-</del>     |          | _           |        |  |  |
| (Specify):  |   | \$                 | 0.00     | \$          | N/A    |  |  |
|   |   | \$                 | 0.00     | \$          | N/A    |  |  |
| 14 GUPTOTAL OF LINES 5 TUDOL                                  | VGVV 10   |                    | 4 000 00 |             | NI/A   |  |  |
| 14. SUBTOTAL OF LINES 7 THROU                                 | JGH 13  | \$                 | 1,823.00 | \$ <u> </u> | N/A    |  |  |
| 15. AVERAGE MONTHLY INCOME                                    | E (Add amounts shown on lines 6 and 14)           | \$                 | 1,823.00 | \$          | N/A    |  |  |
| 16. COMBINED AVERAGE MONTH                                    | HLY INCOME: (Combine column totals from lin       | ne 15)             | \$       | 1,823.      | 00     |  |  |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| In re Latasha I | Latrice | Crawf | ford |
|-----------------|---------|-------|------|
|-----------------|---------|-------|------|

| )ehtor(s) |  |
|-----------|--|
|           |  |

Case No.

| C | CHEDIILE I  | CURRENT | EXPENDITURES | OF INDIVIDITAL | DERTOR(S |
|---|-------------|---------|--------------|----------------|----------|
| O | CHEDULE J - | CUMMENT | LAILIDIIUKLO | OF INDIVIDUAL  |          |

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse." | ete a separat  | te schedule of |
|---|----------------|----------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$             | 350.00         |
| a. Are real estate taxes included? Yes No _X  |                |                |
| b. Is property insurance included? Yes No X   |                |                |
| 2. Utilities: a. Electricity and heating fuel   | \$             | 250.00         |
| b. Water and sewer  | \$             | 25.00          |
| c. Telephone  | \$             | 90.00          |
| d. Other  | \$             | 0.00           |
| 3. Home maintenance (repairs and upkeep)  | \$             | 0.00           |
| 4. Food   | \$             | 750.00         |
| 5. Clothing   | \$             | 70.00          |
| 6. Laundry and dry cleaning   | \$             | 35.00          |
| 7. Medical and dental expenses  | \$             | 65.00          |
| 8. Transportation (not including car payments)  | \$             | 65.00          |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$             | 30.00          |
| 10. Charitable contributions  | \$             | 0.00           |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |                |                |
| a. Homeowner's or renter's  | \$             | 0.00           |
| b. Life   | \$             | 0.00           |
| c. Health   | \$             | 0.00           |
| d. Auto   | \$             | 0.00           |
| e. Other  | \$             | 0.00           |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |                |                |
| (Specify)   | \$             | 0.00           |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the                                |                |                |
| plan)   |                |                |
| a. Auto   | \$             | 0.00           |
| b. Other  | \$             | 0.00           |
| c. Other  | \$             | 0.00           |
| 14. Alimony, maintenance, and support paid to others  | \$             | 0.00           |
| 15. Payments for support of additional dependents not living at your home   | \$ <del></del> | 0.00           |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)                                      | \$             | 0.00           |
| 17. Other School Fees   | \$             | 15.00          |
| Other   | \$             | 0.00           |
|   |                |                |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,  | \$             | 1,745.00       |
| if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)   |                |                |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year                                 |                |                |
| following the filing of this document:  |                |                |
|   | _              |                |
| 20. STATEMENT OF MONTHLY NET INCOME   |                |                |
| a. Average monthly income from Line 15 of Schedule I  | \$             | 1,823.00       |
| b. Average monthly expenses from Line 18 above  | \$             | 1,745.00       |
| a Monthly not income (a minus h)  | •              | 78 00          |

| In re | Latasha Latrice Crawford   |           |                   | Case No.      |      |
|-------|--|-----------|-------------------|---------------|------|
|       |  |           | Debtor(s)         | Chapter       | 13   |
|       |  |           |                   |               |      |
|       |  |           |                   |               |      |
|       | DECLARATION CO   | NCERN     | ING DEBTO         | R'S SCHEDUL   | ES   |
|       | DECLARATION UNDER PE   | ENALTY C  | OF PERJURY BY     | INDIVIDUAL DE | BTOR |
|       |  |           |                   |               |      |
|       | I declare under penalty of perjury that  19 sheets, and that they are true and corre |           |                   | •             | _    |
| Date  | June 9, 2010   | Signature | /s/ Latasha Latri |               |      |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Debtor

| = 10 - 1 - 10 - 10 - 10 - 10 - 10 - 10 - |                             |           |    |  |  |  |  |
|--|-----------------------------|-----------|----|--|--|--|--|
| Latasha Latrice Crawford                 |                             | Case No.  |    |  |  |  |  |
|  | Debtor(s)                   | Chapter   | 13 |  |  |  |  |
|  |                             |           |    |  |  |  |  |
|  | STATEMENT OF FINANCIAL AFF. | AIRS      |    |  |  |  |  |
|  |                             |           |    |  |  |  |  |
|  | Latasha Latrice Crawford    | Debtor(s) |    |  |  |  |  |

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$9,115.00 2010 YTD: SS/ Child support \$21,876.00 2009: SS/ Child support \$21,876.00 2008: SS/ Child support

#### 3. Payments to creditors

None Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ VALUE OF AMOUNT STILL NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT A

OF PAYMENT AMOUNT PAID OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR AND CASE NUMBER NATURE OF PROCEEDING AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE
BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

AMOUNT STILL

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

Dunns Auto 6529 University Blve E Cottondale, AL 35453 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN March 2010

DESCRIPTION AND VALUE OF PROPERTY

**Automobile Deficiency on Honda Passport** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

## 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

CFEFA 205 North 20th Street, Suite 600 Birmingham, AL 35203 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR June 2010 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$35.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None 

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

308 38th Place East, Tuscaloosa, AL 35405

1002 30th Avenue, Apt 207 Northport, AL 35476

NAME USED Latasha Crawford Latasha Crawford DATES OF OCCUPANCY January 2010 to April 2010 2005 to January 2010

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF

**GOVERNMENTAL UNIT** 

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS BEGINNING AND ENDING DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | June 9, 2010 | Signature | /s/ Latasha Latrice Crawford |  |
|------|--------------|-----------|------------------------------|--|
|      |              |           | Latasha Latrice Crawford     |  |
|      |              |           | Debtor                       |  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

| In r | e Lata   | sha Latrice Crawford  |  |   | Case No.   |   |                       |
|------|--|---|--|---|--|---|-----------------------|
|      |  |   |  | Debtor(s)   | Chapter  | 13  |                       |
|      |  | DISCLOSURE O  | OF COMPENSA  | ATION OF ATTOR  | NEY FOR D  | EBTOR(S)  |                       |
| 1.   | compensa   | to 11 U.S.C. § 329(a) and ation paid to me within one ye ed on behalf of the debtor(s) in   | Bankruptcy Rule 20 car before the filing of  | 016(b), I certify that I an f the petition in bankruptcy.   | n the attorney for<br>, or agreed to be pa   | the above-named debtorid to me, for services ren  |                       |
|      | For l  | egal services, I have agreed to   | accept   |   | \$   | 2,000.00  |                       |
|      |  | to the filing of this statement   |  |   |  | 0.00  |                       |
|      |  | nce Due   |  |   |  | 2,000.00  |                       |
| 2.   | The source   | ee of the compensation paid to  | me was:  |   |  |   |                       |
|      |  | Debtor  |  | Other (specify):  |  |   |                       |
| 3.   | The source   | ee of compensation to be paid   | to me is:  |   |  |   |                       |
|      |  | Debtor  |  | Other (specify):  |  |   |                       |
| 5.   | copy In return  a. Analy b. Prepar c. Repred d. Repred e. [Other | e agreed to share the above-discoff the agreement, together with for the above-disclosed fee, I sis of the debtor's financial sit ration and filing of any petition sentation of the debtor at the resentation of the debtor in adverse provisions as needed.  Negotiations with secured reaffirmation agreements 522(f)(2)(A) for avoidance actions, judicial lien avoid | th a list of the names of<br>have agreed to render<br>uation, and rendering<br>n, schedules, statement<br>neeting of creditors a<br>ersary proceedings and<br>d creditors to redu<br>and applications a<br>of liens on housel<br>lances, relief from | of the people sharing in the regal service for all aspects advice to the debtor in detent of affairs and plan which and confirmation hearing, and other contested bankruptce to market value; exercises needed; preparation hold goods.Representations and other contested bankruptch as needed; preparation and goods.Representations or any other contested bankruptch and goods. | compensation is at softhe bankruptcy ermining whether to may be required; d any adjourned he y matters;  mption planning and filling of motion of the debtoer adversary pro- | case, including: ofile a petition in bankrup arings thereof; g; preparation and filin tions pursuant to 11 Urs in any dischargeat | otcy;<br>ng of<br>JSC |
| 6.   |  | ment with the debtor(s), the ab   |  |   | service:   |   |                       |
|      |  |   | C  | ERTIFICATION  |  |   |                       |
| this |  | hat the foregoing is a complete<br>y proceeding.  | e statement of any ag  | reement or arrangement for  | payment to me for  | representation of the deb   | tor(s) in             |
| Date | ed: Jun  | e 9, 2010   |  | /s/ Anne Wilson G   |  |   | _                     |
|      |  |   |  | Anne Wilson Guth<br>WILSON & GUTHF<br>1308 Greensboro<br>Tuscaloosa, AL 35  | RIE, LLC<br>Avenue   |   |                       |

205-349-2330 Fax: 205-349-2380 anneguthrie@bellsouth.net

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ALABAMA

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

## **United States Bankruptcy Court Northern District of Alabama**

| In re  | Latasha Latrice Crawford                       |  | Case No.              |                              |
|--------|--|--|-----------------------|------------------------------|
|        |  | Debtor(s)  | Chapter               | 13                           |
|        |  | F NOTICE TO CONSUL<br>b) OF THE BANKRUP                |                       | <b>(S)</b>                   |
| Code.  | I (We), the debtor(s), affirm that I (we) have | Certification of Debtor received and read the attached | notice, as required b | y § 342(b) of the Bankruptcy |
| Latas  | ha Latrice Crawford                            | X /s/ Latasha L  | atrice Crawford       | June 9, 2010                 |
| Printe | d Name(s) of Debtor(s)                         | Signature of 1   | Debtor                | Date                         |
| Case 1 | No. (if known)                                 | X  |                       |                              |
|        |  | Signature of .   | Joint Debtor (if any) | Date                         |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C.  $\S$  342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

| In re | Latasha Latrice Crawford |           | Case No. |    |
|-------|--------------------------|-----------|----------|----|
|       |                          | Debtor(s) | Chapter  | 13 |

## **VERIFICATION OF CREDITOR MATRIX**

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Afni, Inc./AT&T Po Box 3427 Bloomington, IL 61702 Dunns Auto 6529 University Blve E Cottondale, AL 35453 Tucker Finance 3010A Skyland Blvd East Tuscaloosa, AL 35405

ALABAMA POWER CO 915 QUEEN CITY AVE Tuscaloosa, AL 35401

First Revenue Assurance 4500 Cherry Creek Dr Ste Denver, CO 80246 UNIVERSITY ORTHOPAEDIC CLIN C/O FRANKLIN COLLECTIONS PO BOX 3910 Tupelo, MS 38803-3910

Bay Area Credit Service/ AMR 1901 W 10th St Antioch, CA 94509 Franklin Collection Sv (Original Cr 2978 W Jackson St Tupelo, MS 38801 WEST AL EMERGENCY PHYSICA C/O FRANKLIN COLLECTIONS PO BOX 3910 Tupelo, MS 38803

Care Connect/ CBSi 550 Greensboro Ave Ste 3 Tuscaloosa, AL 35401 Lvnv Funding Llc (Original Creditor Po Box 740281 Houston, TX 77274

Certegy P.O. Box 30046 Tampa, FL 33630 National Credit Syst 3750 Naturally Fresh Blvd Atlanta, GA 30349

Cnac/Al106 3109 Greensboro Ave Tuscaloosa, AL 35401 NORTHSTAR PARAMEDICS C/O CBSI PO BOX 3227 Tuscaloosa, AL 35403

Comcast C/O CBSi 550 Greensboro Avenue Tuscaloosa, AL 35401 Rjm Acq Llc 575 Underhill Blvd Ste 2 Syosset, NY 11791

DCH c/o Franklin Collection Service P.O. Box 3910 Tupelo, MS 38803-3910 Stuart Allan & Associates, Inc 5447 East 5th St, Suite 110 Tucson, AZ 85711-2345

DCH c/o Senex 3500 Depauw Blvd Suite 305 Indianapolis, IN 46268 The Radiology Clinic Credit Bureau Systems P.O. Box 3227 Tuscaloosa, AL 35403-3227

## **B22C** (Official Form 22C) (Chapter 13) (04/10)

| In re   | Latasha Latrice Crawford | According to the calculations required by this statement:           |
|---------|--------------------------|---|
| C N     | Debtor(s)                | <b>■</b> The applicable commitment period is 3 years.               |
| Case Ni | (If known)               | ☐ The applicable commitment period is 5 years.                      |
|         | (II KIIOWII)             | ☐ Disposable income is determined under § 1325(b)(3).               |
|         |                          | ■ Disposable income is not determined under § 1325(b)(3).           |
|         |                          | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

|   | Par   | rt I. REPORT O     | F INCOME                          |  |               |          |  |
|---|---|--------------------|-----------------------------------|--|---------------|----------|--|
|   | Marital/filing status. Check the box that applies a   | nd complete the b  | palance of this part of this stat | ement a                                      | as directed.  |          |  |
| 1 | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.  |                    |                                   |  |               |          |  |
|   | b.   Married. Complete both Column A ("Debt   | tor's Income'') a  | nd Column B ("Spouse's In-        | come'')                                      | for Lines 2-1 | 0.       |  |
|   | All figures must reflect average monthly income re  |                    |                                   | C  | olumn A       | Column B |  |
|   | calendar months prior to filing the bankruptcy case<br>the filing. If the amount of monthly income varied   |                    |                                   | 1  | Debtor's      | Spouse's |  |
|   | six-month total by six, and enter the result on the a   |                    | onthis, you must divide the       |  | Income        | Income   |  |
| 2 | Gross wages, salary, tips, bonuses, overtime, cor   | mmissions.         |                                   | \$   | 0.00          | \$       |  |
| 3 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. |                    |                                   |  |               |          |  |
|   |   | Debtor             | Spouse                            | 1  |               |          |  |
|   | a. Gross receipts   |                    | 0.00 \$                           |  |               |          |  |
|   | b. Ordinary and necessary business expenses   |                    | 0.00 \$                           | <u>                                     </u> |               |          |  |
|   | c. Business income  | Subtract Line b    |                                   | \$   | 0.00          | \$       |  |
| 4 | Rents and other real property income. Subtract the appropriate column(s) of Line 4. Do not enter a part of the operating expenses entered on Line by  | a number less that | n zero. Do not include any        | 1  |               |          |  |
|   | a. Gross receipts   |                    | 0.00 \$                           | 1  |               |          |  |
|   | b. Ordinary and necessary operating expenses  |                    | 0.00 \$                           | 11   |               |          |  |
|   | c. Rent and other real property income  | Subtract Line b    |                                   | \$   | 0.00          | \$       |  |
| 5 | Interest, dividends, and royalties.   |                    |                                   | \$   | 0.00          | \$       |  |
| 6 | Pension and retirement income.  |                    |                                   | \$   | 0.00          | \$       |  |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.   |                    |                                   | \$   | 0.00          | \$       |  |
| 8 | <b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  |                    |                                   |  |               |          |  |
|   | Unemployment compensation claimed to be a benefit under the Social Security Act Debtor  | r \$ <b>0.0</b> 0  | Spouse \$                         | \$   | 0.00          | \$       |  |

| 9  | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  |  |          |           |
|----|--|--|----------|-----------|
|    | Debtor   Spouse  |  |          |           |
|    | a.   Child Support   \$   957.00   \$     5     5     5     5  | 957.00   | \$       |           |
| 10 | Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).  | 957.00   | \$       |           |
| 11 | <b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.  | \$   |          | 957.00    |
|    | Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PE   | ERIOD  |          |           |
| 12 | Enter the amount from Line 11  |  | \$       | 957.00    |
| 13 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you concalculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regulate household expenses of you or your dependents and specify, in the lines below, the basis for exclusionation (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional on a separate page. If the conditions for entering this adjustment do not apply, enter zero.  a. \$ b. \$ c. \$ C. | f your spouse,<br>ilar basis for<br>uding this<br>e debtor or the<br>l adjustments |          |           |
|    | Total and enter on Line 13   | :  | \$       | 0.00      |
| 14 | Subtract Line 13 from Line 12 and enter the result.  | :  | \$       | 957.00    |
| 15 | <b>Annualized current monthly income for § 1325(b)(4).</b> Multiply the amount from Line 14 by the nenter the result.  |  | \$       | 11,484.00 |
| 16 | <b>Applicable median family income.</b> Enter the median family income for applicable state and househ (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankrup   | otcy court.)   |          |           |
|    | a. Enter debtor's state of residence: AL b. Enter debtor's household size:   | 4  | \$       | 65,079.00 |
| 17 | <ul> <li>Application of § 1325(b)(4). Check the applicable box and proceed as directed.</li> <li>■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicate the top of page 1 of this statement and continue with this statement.</li> <li>□ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicate the top of page 1 of this statement and continue with this statement.</li> </ul>   |  |          |           |
|    | Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE   | E INCOME   |          |           |
| 18 | Enter the amount from Line 11.   |  | \$       | 957.00    |
| 19 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expedebtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B in payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustm separate page. If the conditions for entering this adjustment do not apply, enter zero.    a.  | enses of the<br>ncome(such as<br>ebtor's   |          |           |
|    | c. \$ Total and enter on Line 19.  |  | ¢        | 0.00      |
| 20 | Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.   |  | \$<br>\$ | 957.00    |
|    | *  |  | Ψ        | 331.00    |

| 21  |  | alized current monthly inc<br>he result.  | ome for § 1325(b)(3). I                            | Multij                                     | ply the a    | amount from Line 2                        | 20 by the number 12 and                         | \$            | 11,484.00   |
|-----|--|---|--|--|--------------|---|---|---------------|-------------|
| 22  | Applicable median family income. Enter the amount from Line 16.  |   |  |  |              |   | \$  | 65,079.00     |             |
| 23  | Application of § 1325(b)(3). Check the applicable box and proceed as directed.  The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is deter 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.  The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is  |   |  |  |              |   | not dete  | ermined under |             |
|     | § .  | 1325(b)(3)" at the top of pag   |  |  |              |   | <del>-</del>                                    | arts IV       | , V, or VI. |
|     |  |   | ALCULATION (                                       |  |              |   |   |               |             |
|     | 1  |   | eductions under Star                               |  |              |   |   | T             |             |
| 24A | Enter applic   | nal Standards: food, appar<br>in Line 24A the "Total" amo<br>able household size. (This i<br>aptcy court.)  | ount from IRS National                             | Stand                                      | lards for    | Allowable Living                          | Expenses for the                                | \$            |             |
| 24B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. |   |  |  |              |   |   |               |             |
|     | Household members under 65 years of age  |   | vears of age                                       | Household members 65 years of age or older |              |   |   |               |             |
|     | a1.  | Allowance per member  |  | a2. Allowance per member                   |              |   |   |               |             |
|     | b1.  | Number of members   |  | b2.  |              | er of members                             |   |               |             |
|     | c1.  | Subtotal  |  | c2.  | c2. Subtotal |   |   | \$            |             |
| 25A | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).  |   |  |  |              | \$  |   |               |             |
| 25B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rent Expense \$ b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47  c. Net mortgage/rental expense Subtract Line b from Line a.   |   |  |  | \$           |   |   |               |             |
| 26  | Local<br>25B d<br>Standa   | Standards: housing and usoes not accurately computerards, enter any additional artition in the space below: | tilities; adjustment. If<br>the allowance to which | you a                                      | re entitl    | that the process se<br>ed under the IRS I | t out in Lines 25A and<br>Housing and Utilities | \$            |             |

| 27A | Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7.   If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Consus Pagion (These amounts are qualished at yours) and governt or from the alege of the head regardless. |   |    |  |  |  |
|-----|--|---|----|--|--|--|
|     | Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that  | <b>expense.</b> If you pay the operating expenses   | \$ |  |  |  |
| 27B | your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)   |   |    |  |  |  |
| 28  | Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.)   1  2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Average Monthly Payments for any debts secured by Vehicle 1, as stand enter the result in Line 28. Do not enter an amount less than zeta.  IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47  c. Net ownership/lease expense for Vehicle 1  | e IRS Local Standards: Transportation court); enter in Line b the total of the ated in Line 47; subtract Line b from Line a | \$ |  |  |  |
| 29  | Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy Average Monthly Payments for any debts secured by Vehicle 2, as stand enter the result in Line 29. Do not enter an amount less than zet a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47  c. Net ownership/lease expense for Vehicle 2  | e IRS Local Standards: Transportation court); enter in Line b the total of the ated in Line 47; subtract Line b from Line a | \$ |  |  |  |
| 30  | Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale   | come taxes, self employment taxes, social   | \$ |  |  |  |
| 31  | Other Necessary Expenses: mandatory deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluments.  | retirement contributions, union dues, and   | \$ |  |  |  |
| 32  | Other Necessary Expenses: life insurance. Enter total average monlife insurance for yourself. Do not include premiums for insurance any other form of insurance.   |   | \$ |  |  |  |
| 33  | Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.   |   | \$ |  |  |  |
| 34  | Other Necessary Expenses: education for employment or for a ph<br>Enter the total average monthly amount that you actually expend for<br>and for education that is required for a physically or mentally challen<br>education providing similar services is available.   | education that is a condition of employment   | \$ |  |  |  |
| 35  | Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. <b>Do</b>   |   | \$ |  |  |  |

| 36 | Other Necessary Expenses: health care. Enter the average that is required for the health and welfare of yourse or paid by a health savings account, and that is in excess payments for health insurance or health savings account.   | \$  |    |  |  |
|----|--|---|----|--|--|
| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.   |   |    |  |  |
| 38 | Total Expenses Allowed under IRS Standards. Enter  | the total of Lines 24 through 37.                         | \$ |  |  |
|    | Subpart B: Addition  | onal Living Expense Deductions                            |    |  |  |
|    | Note: Do not include any exp   | penses that you have listed in Lines 24-37                |    |  |  |
|    | <b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.  |   |    |  |  |
| 39 | a. Health Insurance  | \$  |    |  |  |
|    | b. Disability Insurance  | \$  |    |  |  |
|    | c. Health Savings Account  | \$  |    |  |  |
|    | Total and enter on Line 39   |   | \$ |  |  |
|    | If you do not actually expend this total amount, state space below:  \$  | your actual total average monthly expenditures in the     |    |  |  |
| 40 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.   |   |    |  |  |
| 41 | <b>Protection against family violence.</b> Enter the total averactually incur to maintain the safety of your family undo other applicable federal law. The nature of these expens  | er the Family Violence Prevention and Services Act or     | \$ |  |  |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  |   |    |  |  |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.                  |   |    |  |  |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. |   | \$ |  |  |
| 45 | <b>Charitable contributions.</b> Enter the amount reasonably contributions in the form of cash or financial instrument 170(c)(1)-(2). <b>Do not include any amount in excess of</b>  | ts to a charitable organization as defined in 26 U.S.C. § | \$ |  |  |
| 46 | Total Additional Expense Deductions under § 707(b)   | • Enter the total of Lines 39 through 45.                 | \$ |  |  |

|    |  |  | <b>Subpart C: Deductions for De</b>  | bt l    | Payment                       |   |    |
|----|--|--|--|---------|-------------------------------|---|----|
| 47 | own,<br>check<br>scheo<br>case,  | <b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47. |  |         |                               |   |    |
|    |  | Name of Creditor   | Property Securing the Debt   |         | Average<br>Monthly<br>Payment | Does payment include taxes or insurance |    |
|    | a.   |  |  | \$<br>T | otal: Add Lines               | yes no                                  | \$ |
| 48 | Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in   |  |  |         |                               |   |    |
|    | a.   |  |  |         | \$                            | Total: Add Lines                        | \$ |
| 49 | Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as  |  |  |         |                               | \$                                      |    |
|    |  | pter 13 administrative expense ting administrative expense.  | es. Multiply the amount in Line a by the   | am      | ount in Line b, a             | nd enter the                            |    |
| 50 | a.<br>b.   | issued by the Executive Off  | Chapter 13 plan payment. district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of | \$<br>x |                               |   |    |
|    | c.   |  | ative expense of Chapter 13 case   | To      | otal: Multiply Li             | nes a and b                             | \$ |
| 51 | <b>Total Deductions for Debt Payment.</b> Enter the total of Lines 47 through 50.  |  |  |         |                               | \$                                      |    |
|    |  |  | Subpart D: Total Deductions f  | ron     | n Income                      |   |    |
| 52 | Tota   | l of all deductions from incom   | ne. Enter the total of Lines 38, 46, and 5   | 51.     |                               |   | \$ |
|    |  | Part V. DETERM   | INATION OF DISPOSABLE I  | NC      | OME UNDE                      | ER § 1325(b)(2)                         |    |
| 53 | <b>Total current monthly income.</b> Enter the amount from Line 20.  |  |  |         |                               | \$                                      |    |
| 54 | <b>Support income.</b> Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child. |  |  |         |                               | \$                                      |    |
| 55 | wage   |  | Enter the monthly total of (a) all amoun retirement plans, as specified in § 541(bified in § 362(b)(19).                                       |         |                               |   | \$ |
| 56 | Tota   | l of all deductions allowed un   | der § 707(b)(2). Enter the amount from   | Lin     | ne 52.                        |   | \$ |

|    | Deduction for special circumstances. If there are special conviction which there is no reasonable alternative, describe the special below. If necessary, list additional entries on a separate page You must provide your case trustee with documentation explanation of the special circumstances that make such | I circumstances and the resulting expenses in lines a-<br>e. Total the expenses and enter the total in Line 57.<br>of these expenses and you must provide a detailed |            |
|----|---|--|------------|
| 57 | Nature of special circumstances   | Amount of Expense  |            |
|    | a.  | \$   |            |
|    | b.  | \$   |            |
|    | c.  | \$   |            |
|    |   | Total: Add Lines   | \$         |
| 58 | Total adjustments to determine disposable income. Add result.   | the amounts on Lines 54, 55, 56, and 57 and enter the  | ne         |
| 59 | Monthly Disposable Income Under § 1325(b)(2). Subtrac   | t Line 58 from Line 53 and enter the result.   | \$         |
|    | Part VI ADDITION  | NAL EXPENSE CLAIMS   |            |
|    | <b>Other Expenses.</b> List and describe any monthly expenses, nof you and your family and that you contend should be an act 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses.   | dditional deduction from your current monthly incom  | ne under § |
| 60 | Expense Description   | Monthly Amou   | int        |
| 00 | a.  | \$   |            |
|    | b.  | \$   |            |
|    | c.  | \$   |            |
|    | d.  | \$   |            |
|    | Total: Add Li   | ines a, b, c and d \$  |            |
|    | Part VII.   | VERIFICATION   |            |
| 61 | I declare under penalty of perjury that the information provide must sign.)  Date: June 9, 2010   | ded in this statement is true and correct. (If this is a Signature: /s/ Latasha Latrice Cra  |            |

### STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

#### INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

#### WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

#### WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

#### WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

#### OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,347,500 (\$336,900 in unsecured debts and \$1,010,650 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

| /s/ Latasha Latrice Crawford | June 9, 2010 |
|------------------------------|--------------|
| Debtor's Signature           | Date         |